



13281 U.S. PTO

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PTO/SB/05 (08-03)

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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. 500.43697X00	
<i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		First Inventor TACHIHARA, HIDEKAZU	
		Title PERFORMANCE MANAGEMENT METHOD, SYSTEM AND PROGRAM	
		Express Mail Label No.	
APPLICATION ELEMENTS SEE MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450	
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p><p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p><p>3. <input checked="" type="checkbox"/> Specification [Total Pages: 57] <i>(preferred arrangement set forth below)</i></p><ul style="list-style-type: none">-Descriptive title of the invention-Cross Reference to Related Applications-Statement Regarding Fed sponsored R & D-Reference to sequence listing, a table, or a computer program listing appendix-Background of the Invention-Brief Summary of the Invention-Brief Description of the Drawings (if filed)-Detailed Description-Claim(s)-Abstract of the Disclosure<p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets: 37]</p><p>5. Oath or Declaration [Total Sheets: _____]</p><p style="margin-left: 20px;">a. <input type="checkbox"/> Newly executed (original or copy)</p><p style="margin-left: 20px;">b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 18 completed)</i></p><p style="margin-left: 20px;">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</p><p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p></div><div style="width: 48%;"><p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p><p>8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p><p style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Form (CRF)</p><p style="margin-left: 20px;">b. Specification Sequence Listing on:</p><p style="margin-left: 40px;">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p><p style="margin-left: 40px;">ii. <input type="checkbox"/> paper</p><p style="margin-left: 20px;">c. <input type="checkbox"/> Statements verifying identity of above copies</p></div></div>			
ACCOMPANYING APPLICATION PARTS			
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p>9. <input type="checkbox"/> Assignment Papers (cover sheet & documents(s))</p><p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></p><p>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p><p>12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Citations Statement (IDS)/PTO-1449</p><p>13. <input type="checkbox"/> Preliminary Amendment</p><p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p><p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p><p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p><p>17. <input checked="" type="checkbox"/> Other: Figs. 1-42; Credit Card Payment Form; Claim for Priority</p></div><div style="width: 48%;"></div></div>			
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p style="text-align: center;"><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.:</p> <p>Prior application information: Examiner: _____ Art Unit: _____</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			
19. CORRESPONDENCE ADDRESS			
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> Customer Number 020457</div><div>OR <input type="checkbox"/> Correspondence address below</div></div>			
Name ANTONELLI, TERRY, STOUT & KRAUS, LLP			
Address			
City		State	Zip Code
Country		Telephone (703) 312-6600	Fax (703) 312-6666
Name (Print/Type) Paul J. Skwierawski		Registration No. (Attorney/Agent) 32,173	
Signature <i>Paul J. Skwierawski</i>		Date	March 24, 2004

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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FEE TRANSMITTAL for FY 2004 <i>Effective 10/01/2003. Patent fees are subject to annual revision.</i>		Complete if Known																																																																																																																																																																																			
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The Director is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application. <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																																																																																																																																																																					
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Paul J. Skwlerawski	Registration No. (Attorney/Agent)	32,173
Signature	<i>Paul J. Skwlerawski</i>	Telephone	703-312-6600
		Date	03/24/2004

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